

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

APPLICANT(S)

FILING DATE

07-21-03

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
	IND	DEP	IND	DEP	IND	DEP	
1	1						
2	1						
3	1						
4	1						
5	1						
6	1						
7	1						
8	1						
9	2						
10	2						
11	2						
12	2						
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49							
50							
TOTAL IND.	1		1		1		
TOTAL DEP.	17		17		17		
TOTAL CLAIMS	18						

	IND	DEP	IND	DEP	IND	DEP
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